

GOLDEN VALLEY PARK AND RECREATION DEPARTMENT

200 BROOKVIEW PARKWAY

GOLDEN VALLEY, MN 55426-1364

763-512-2345

ADULT ATHLETIC ELIGIBILITY/CONDUCT/FORFEIT FORM

On this date, _____, 2013, I have written my personal check or submitted my VISA/MasterCard information for \$100.00, payable to the City of Golden Valley, (separate from the league fee), which will be held and not cashed, and will be returned approximately 2 weeks after the state tournament date, providing my team does not use or have rostered any ineligible player or become involved in unsportsmanlike conduct as defined by the Golden Valley Park and Recreation Department and the MRPA/USSSA, or forfeited more than one game.

If my team is found using or rostering any ineligible players, if my team is involved in unsportsmanlike conduct, or if my team forfeits more than one game, I understand I will forfeit the deposit of \$100.00. A second \$100.00 check must be in the Park & Recreation office before the violating team can continue league play.

If my team commits to a post season MRPA/USSSA tournament berth, my team is then required to play in that tournament. My check will not be refunded in the event my team does not participate or is involved in ineligible player or unsportsmanlike conduct in the tournament.

CONSENT TO RELEASE OF INFORMATION

I authorize the City of Golden Valley, to disclose to the City's insurer, attorney, staff, coaches, participants, and other personnel involved in this program the following information: name, address and telephone number. This information shall be used for the purpose of program administration. This consent to release information shall expire one year from the date of execution. I understand that the records are protected under state and federal privacy regulations and cannot be disclosed with-out my written consent unless otherwise provided by law. I also understand that I may cancel this consent at any time prior to the information being released.

Team Manager's Signature

Team Name

☐ VISA

☐ MasterCard

Card # _____ Exp. Date: _____

Signature: _____